SA Health

# SA Community Pharmacy Urinary Tract Infection (UTI) Services

# UTI Management Protocol

February 2024



# Authorisation

## **Community Pharmacy Urinary Tract Infection (UTI) Services**

In accordance with the *Community Pharmacy Urinary Tract Infection Services Scheme* as determined by the Minister for Health and Wellbeing by notice in the <u>Gazette</u> on 2<sup>nd</sup> February 2024, registered pharmacists who have successfully completed training may supply specified antibiotic medicines without a prescription to eligible patients for the treatment of acute uncomplicated urinary tract infection (UTI).

# **UTI Management Protocol**

This protocol provides a framework for pharmacists authorised to supply approved medicines for the management of suspected uncomplicated urinary tract infection (UTI) in eligible patients, under the *Community Pharmacy Urinary Tract Infection Services Scheme*.

This protocol should be read and used in conjunction with relevant professional practice standards and evidence based clinical guidelines, in particular the <u>Pharmaceutical Society of Australia (PSA)</u> <u>Treatment Guidelines for Pharmacists – Cystitis</u>, and advice contained within the *Therapeutic Guidelines* and *Australian Medicines Handbook*. The **SA Health Urinary Tract Infections (adult): Empirical Treatment Clinical Guideline** is also in place in South Australia. This protocol is based upon these evidence-based guidelines.

# Services

*Community Pharmacy Urinary Tract Infection Services* will provide timely access to advice, assessment and treatment for women with symptoms of uncomplicated UTI. The services will increase options available for consumers to seek treatment and are complementary to other treatment services for UTI, including via general practitioners.

# Conditions

### Pharmacist

- > The pharmacist providing services has an unconditional general registration with the Australian Health Practitioner Regulation Agency (Ahpra).
- > The pharmacist must comply with all relevant legislation, Australian Health Practitioner Regulation Agency (Ahpra) and the Pharmacy Board of Australia's Code of Conduct, and the expected standards of ethical behaviour of pharmacists towards individuals, the community and society.
- Prior to providing services, the pharmacist must have successfully completed approved training as referred to in **Appendix 1**, and must maintain eligibility to provide services, including any ongoing training.

### Pharmacy

- Community pharmacies registered by the Pharmacy Regulation Authority of South Australia (PRASA) may participate in the scheme.
- > The pharmacy must have an area suitable to maintain confidentiality of the consultation, i.e. have a screened or private consulting area that:
  - Ensures patients' privacy and confidentiality, including visual and auditory privacy
  - Has sufficient space to allow the presence of the patient, a carer if required, the pharmacist, and relevant documentation.

### Approved medicines

- The pharmacist must only supply approved medicines as per requirements listed in Appendix
  2.
- > The medicines are only sold or supplied to eligible patients in accordance with relevant professional practice standards and guidelines, and this UTI Management Protocol.

- Supply, packaging and labelling of the approved medicines is in accordance with the Controlled Substances Act (1984) and the Controlled Substances (Poisons) Regulations 2011.
- > The pharmacist must not sell or supply the medicines in a quantity that exceeds the smallest available size of the manufacturer's pack of the medicine.

#### Patient eligibility

- > Eligible patients include women aged 18 to 65 years with an anatomical female urinary tract presenting to a community pharmacy:
  - Who are deemed to be likely experiencing an acute uncomplicated urinary tract infection, after assessment by a pharmacist; and
  - o Who are at low risk of complications, as assessed by a pharmacist; and
  - Who meet inclusion criteria in accordance with relevant professional practice standards, guidelines and this UTI Management Protocol.
- Ineligible patients include females aged under 18 years and over 65 years, males, and individuals who have undergone gender reassignment surgery. UTIs in these groups are more likely be complicated and require referral to a general practitioner or other health service for further review.

#### **Clinical documentation and communication**

- > The pharmacist must make a clinical record and a record in a pharmacy dispensing system regarding the supply of any antibiotics under these services.
- > The pharmacist is required, to make and keep (at the pharmacy where the patient consultation occurred) a comprehensive clinical record of the consultation and of any treatment provided, in accordance with relevant legislation and professional responsibilities. The record must include:
  - o sufficient information to identify the patient
  - the name of the pharmacist who undertook the consultation and their healthcare identifier number (HPI-I)
  - the date of the consultation
  - information relevant to the patient's diagnosis and treatment (for example, patient's medical history, adverse drug reactions)
  - $\circ$  any clinical opinion reached, and actions taken by the pharmacist
  - details of any medication supplied for the patient (generic name, form, strength and quantity)
  - any information or advice given by the pharmacist to the patient in relation to any proposed treatment
  - any consent given by a patient to the consultation, treatment proposed, sharing information with their medical practitioner.
- > Where a patient has a My Health Record, the pharmacist must ensure the details of the medicine supply are uploaded to My Health Record, unless requested otherwise by the patient.

- > The pharmacist must offer a record of the treatment and consultation to the patient. This may include a copy of the checklist completed by the pharmacist during the consultation. The patient may choose to share this with their GP or other health professionals. Where possible, the patient should be actively encouraged to provide the consultation summary (patient checklist/outcome) to their GP, in order to have the episode of care recorded within their personal medical record at the general practice.
- > Following consent by the patient, the pharmacist may share a record of the supply and consultation with the patient's usual treating medical practitioner or medical practice, where the patient has one.
- > Pharmacists will ensure continuity of care and use their professional discretion to refer the patient to health professionals or services where appropriate, and where eligibility criteria are not met.
- > Pharmacists must, at the request of the Minister for Health and Wellbeing, provide data on the scheme periodically (for monitoring and evaluation purposes).

#### **Consultation fees**

- > Pharmacists may charge a consultation fee for the service, in addition to the cost of any medicine that is supplied.
- > Pharmacists should ensure that the patient understands the costs involved when offering the service.

# **Cultural safety**

Pharmacists must complete cultural safety and gender diversity training relevant to their place of practice, reflect on their competency and provide the service in ways that are inclusive, culturally safe, sensitive, and responsive.

# Community Pharmacy UTI Services Clinical Flow Chart



# Supplementary Information

#### **Conservative Management**

Evidence based conservative management for uncomplicated UTI may include pain management and other non-prescription medicines. Non-pharmacological and self-care advice should also be provided.

#### Antibiotic selection

Recommendations for empiric antibiotic treatment are based on factors including efficacy, convenience, cost, availability, harms associated with antibiotic use (e.g. adverse effects in the patient, development of antibiotic resistance), resistance rates of common pathogens and a consideration of the risk of adverse outcomes from clinical failure.

When selecting antibiotic treatment consider drug allergies, drug interactions and other contraindications.

#### Urinalysis

The use of urinalysis by dipstick is not being mandated as part of the Community Pharmacy Urinary Tract Infection Services and is not a part of empiric treatment. The probability of cystitis is greater than 90% when at least two primary symptoms of cystitis are present, in the absence of vaginal discharge. Situations where there is a question over diagnosis of uncomplicated UTI should be referred to a medical practitioner for further assessment.

#### Patient Information and Referral to General Practitioners and other Health Services

Where a patient is prescribed medication, they should be given Consumer Medicines Information (CMI) about possible side effects (as per usual practice) and told to see their GP if symptoms worsen or are not resolved within 2 days.

In cases where there are symptoms not associated with uncomplicated UTI, patients should be referred to a general practitioner or other health service.

Presentations to healthcare for acute issues, such as UTI, are also important opportunities to engage patients in preventative healthcare, such as screening and education, and referral to a general or other medical practitioner where appropriate. Patients should be provided information about prevention of UTIs.

# Review

This UTI Management Protocol will be reviewed on a regular basis as required.

# Appendix 1 - Training requirements

Prior to providing services, pharmacists must have successfully completed one or more of the approved competency-based training programs on managing urinary tract infections delivered through a higher education institution accredited by the Tertiary Education Quality and Standards Agency or an accredited continuing professional development program, that meets the Australian Pharmacy Council's Standards for Continuing Professional Development Activities.

Training programs must include learning objectives on:

- > Classification and epidemiology of urinary tract infections.
- > Clinical features, assessment and differential diagnosis, including conditions with similar symptoms and risk factors for complicated UTIs.
- > Pharmacological and non-pharmacological management of UTIs.
- > Evidence and role of over-the-counter products for UTIs.
- > Antimicrobial resistance management and stewardship.
- > The importance of referring a patient to a GP or other appropriate health service if risk factors for complicated UTI are present or a pharmacist is not confident that an uncomplicated UTI is a likely diagnosis.
- > The importance of ensuring privacy and confidentiality for patients in pharmacy.

Current approved training:

Pharmaceutical Society of Australia Managing uncomplicated cystitis online training module https://my.psa.org.au/s/training-plan/a110o0000JPST0AAP/managing-uncomplicated-cystitisurinarytract-infection

Australasian College of Pharmacy Uncomplicated Cystitis Treatment – Pharmacist Training https://www.acp.edu.au/uti-guidance/

# Appendix 2 – Approved Medicines

Sale or supply must comply with the *Community Pharmacy Urinary Tract Infection Services Scheme* as determined by the Minister for Health and Wellbeing by notice in the <u>Gazette</u> on 02/02/2024 and *SA Community Pharmacy UTI Services* – UTI Management Protocol.

Approved oral antibiotics	Dosage	Maximum quantity	Conditions
Trimethoprim 300mg (First line)	300mg orally, daily at night for 3 nights	3 tablets or capsules	
Nitrofurantoin 100mg (Second line)	100mg orally, every 6 hours for 5 days	20 tablets or capsules	Sale and supply limited to circumstances where trimethoprim is not appropriate for the patient or not available
Cefalexin 500mg (Third line)	500mg orally, every 12 hours for 5 days	10 tablets or capsules	Sale and supply limited to circumstances where trimethoprim and nitrofurantoin are not appropriate for the patient or not available

# Appendix 3 - References

## **Professional Practice Standards**

Pharmaceutical Society of Australia Professional Practice Standards 2023, version 6 https://www.psa.org.au/practice-support-industry/pps/

## **Clinical Guidelines**

**UTI Treatment Guidelines** 

SA Health Urinary Tract Infections (adult): Empirical Treatment Clinical Guideline

https://inside.sahealth.sa.gov.au/wps/wcm/connect/non-public+content/sa+health+intranet/policies/az+policies+and+guidelines/clinical+policies+and+guidelines/urinary+tract+infections+adult+empirical+ treatment+clinical+guideline

Pharmaceutical Society of Australia. Treatment guideline for pharmacists: Cystitis

https://my.psa.org.au/s/article/Treatment-guideline-for-pharmacists-cystitis

Australasian College of Pharmacy. Pharmacist Treatment Guidance: Uncomplicated Cystitis <a href="https://www.acp.edu.au/uti-guidance/">https://www.acp.edu.au/uti-guidance/</a>

Antibiotic [published 2019 May]. In: Therapeutic Guidelines. Melbourne: Therapeutic Guidelines Limited

https://www.tg.org.au

**STI Guidelines** 

Australian STI management guidelines for use in primary care

https://sti.guidelines.org.au/sexual-history/

## **Approved Pharmacist Urinary Tract Infection Training**

Australasian College of Pharmacy Uncomplicated Cystitis Treatment – Pharmacist Training https://www.acp.edu.au/uti-training/sa/

Pharmaceutical Society of Australia Managing uncomplicated cystitis online training module <u>UTI resources - Pharmaceutical Society of Australia (psa.org.au)</u>

## **Other Relevant Training**

**Cultural safety** 

Pharmaceutical Society of Australia Deadly pharmacists foundations training course Training Plan: Deadly pharmacists foundation training course (psa.org.au)

STI

Is it UTI or STI? Identifying the difference - Webinar (ACP Feb 2021)

## **Feedback and Complaints**

Australian Health Practitioner Regulation Agency - Checklist for practitioners handling feedback and complaints (ahpra.gov.au)

## **Consumer Information**

**Better Health Channel:** 

https://www.betterhealth.vic.gov.au/health/conditionsandtreatments/urinary-tract-infections-uti

UTI fact sheet from Kidney Health Australia

https://kidney.org.au/uploads/resources/KHA-Factsheet-urinary-tract-infections-2018.pdf

SA Health Urinary tract infection (UTI) – including symptoms treatment and prevention

Urinary tract infection (UTI) - including symptoms treatment and prevention | SA Health

Pharmaceutical Society of Australia UTI Self-care fact card

UTI resources - Pharmaceutical Society of Australia (psa.org.au)