

Pyelonephritis (uncomplicated) Standing Order

Issue date:		Review date:	
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This standing order is not valid after the review date. The review date is one year after the date the order was signed by the issuer.

Standing Order Name	Pyelonephritis (uncomplicated)
Rationale	To treat patients presenting with uncomplicated pyelonephritis quickly and appropriately in primary care to prevent deterioration.
Scope (condition and patient group)	Adult patients who are presenting with signs and symptoms of uncomplicated pyelonephritis
Red Flags	If persisting fever or loin pain, then consider alternative diagnosis
Assessment	<ol style="list-style-type: none"> Signs and symptoms <ul style="list-style-type: none"> Fever >38oC Rigors Loin pain or tenderness Investigations <ul style="list-style-type: none"> Send urine for microscopy and culture Arrange urgent CBC and serum creatinine
Indication	Uncomplicated pyelonephritis <u>without</u> nausea and vomiting
Medicine	Amoxicillin + clavulanic acid 500/125mg
Dosage instructions	Give ONE tablet THREE times daily for 10 days
Route of administration	orally
Quantity to be given	30 x 500/125mg tablets
Contraindications	Allergy to penicillin antibiotics
Precautions	<ul style="list-style-type: none"> Maintain adequate hydration History of allergy
Indication	Penicillin allergic patients with uncomplicated pyelonephritis <u>without</u> nausea and vomiting
Medicine	Co-trimoxazole 480mg (trimethoprim 80mg + sulfamethoxazole 400mg) tablets
Dosage instructions	Give TWO tablets TWICE daily for 10 days
Route of administration	orally
Quantity to be given	40 x 480mg tablets
Contraindications	Allergy to sulphur containing medications
Precautions	<ul style="list-style-type: none"> Discontinue immediately if blood disorders or rash develop If patient is on warfarin—monitor INR 3 days after starting co-trimoxazole
Additional information	Arrange renal ultrasound (if no previous imaging) if: <ul style="list-style-type: none"> male with acute pyelonephritis. female with two episodes of acute pyelonephritis
Follow-up	If not improving within 24-48 hours and patient has persisting fever or loin pain then reassess patient and query diagnosis. If urine culture show resistance to antibiotics chosen, then recall patient to change antibiotics.
Countersigning and auditing	Countersigning is not required. Audited monthly. OR Countersigning is required within XX days
Competency/training requirements	All nurses working under this standing order must be signed off as competent to do so by the issuer and have had specific training in this standing order.

Supporting documentation	Healthpathways at www.healthpathways.org.nz Best Practice Journal at www.bpac.org.nz New Zealand Formulary at www.nzf.org.nz Individual medicine data sheets at www.medsafe.govt.nz BMJ Best Practice http://bestpractice.bmj.com Standing Order Guidelines, Ministry of Health, 2012 Medicines (Standing Order) Regulations 2012 (Standing Order Regulations)
Definition of terms used in standing order	<u>Uncomplicated pyelonephritis</u> – refers to patients presenting with the symptoms above and who have: <ul style="list-style-type: none"> • Normal kidney function • Normal renal structure • Not pregnant • No complicating disease e.g., diabetes

Medical Centre or Clinic:	
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Signed by issuers

Name: _____

Signature: _____

Title: _____

Date: _____

Nurses operating under this standing order

Only Registered nurses working within the above medical centre or clinic are authorised to administer medication under this standing order.

We the undersigned agree that we have read, understood and will comply with this standing order and all associated documents.

Name: _____ Signature: _____ Date: _____

Name: _____ Signature: _____ Date: _____

Name: _____ Signature: _____ Date: _____

Name: _____ Signature: _____ Date: _____