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Lowering UTIs in SCI

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Lowering UTI Rates In SCI

Addressing UTI in spinal cord injury patients is significant because the high occurrence of UTIs adversely affects both the patient and health care organizations. Studies show that neurogenic bladder is common in SCI patients which results in increased retention of urine and rates of bacteria. This calls for continuous intermittent catheterizations, increasing risk of infection and compromising health of the patient. Studies found UTIs lead to greater hospitalization lengths, costs, and waste. The purpose of this project is to lower UTI rates by identifying bacteria in urine daily, thus treating UTI sooner. Urine cultures are necessary to monitor potential microorganisms because of the asymptomatic nature of UTI's in SCI patients. Implementing daily urine cultures intends to detect UTI's sooner and provide immediate care. This project proposes for the lab to track rates of UTIs in 50 SCI patients who are within 6 months from their SCI date. The chosen patients will have preexisting bladder programs that involve some form of catheterization. This quantitative analysis of UTI occurrence will start one month prior to implementation, and one month after measures are intact for comparison. The timeline will take two months total. By identifying the bacteria in cultures, antibiotic therapy is specific to each UTI. By treating UTI sooner, the patient's length of hospitalization is shorter. This indicates utilizing less hospital resources, less waste, and greater patient satisfaction. It is a cheaper and safer alternative than other methods like antimicrobial prophylaxis which can cause MRSA. The results will be analyzed by a positive or negative bacterial result. It is expected that the rates of UTI's decrease from persistent tracking of bacteria in comparison to the previous model, daily urine culture implementation will successfully decrease the occurrence of UTI.

Keywords: SCI, UTI, urine culture, bacteria, antibiotics