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The changing landscape of urological management in women

In the recently published Primary Care update on urinary tract infection, the American Urological Association estimated that over 150 million UTIs occur annually worldwide, with an estimated healthcare cost of over \$6 billion. There are a variety of diagnoses associated with urinary tract symptoms that may occur in the absence of bacterial infection. In the interest of healthcare cost savings there have been some recommendations to avoid UCX and just treat UTI based on sex and urine dipstick. Primary healthcare providers will continue to evaluate and manage the clear majority of UTIs in the outpatient population. Providers should be armed with the knowledge of emerging trends in UTI diagnosis and treatment. This presentation seeks to explore these trends and identify the tools needed to direct cost effective, yet population protective, management of outpatient UTIs in women throughout the lifespan. Providers need to consider whether testing is indicated or not. Selecting a treatment regimen should be carried out with consideration of culture specific pathogen results as well as complicating patient factors and the suspected, vs proven, site of illness. Highlights of this presentation include associated issues such as up to date antibiotic stewardship recommendations, current trends in pathogen resistance and recommendations regarding testing, management and where appropriate, referral for urological evaluation with Subspecialty services.

Biography

Lauren Madere Hoel has been a Registered Nurse for 35 years and a Nurse Practitioner for 18 years. She brings a wide variety of practice experience to the Department of Urology, Pediatric HIV Research and Clinical Care, Cardiology, Allergy and Immunology, Nephrology and joining the Urology Department in May of 2014. She has been a volunteer for the National Alliance on Mental Illness for 3 years.

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