Urine collection in infants and young children

Urinary Tract Infection (UTI) is an infection in the urinary tract. A urine test is the only way to know for sure if your child has a UTI. If your child has signs and symptoms of a UTI such as fever, vomiting, poor feeding, abdominal pain, burning sensation when passing urine or passing urine frequently, it is likely that your child will need to have a urine sample collected.

UTI’s cannot be diagnosed with urine from a bag specimen. Babies and young children who cannot pass urine when asked will need to have a clean catch urine sample collected.

How to catch a clean catch urine sample
- Wash the external genitalia and perineum (nappy area) with soap and water.
- Rinse and dry with a flannel or cloth.
- Position your child on a bed or your lap with the foil dish within reach or place the dish under the perineum in girls or penis in boys; wait for your child to urinate into the dish.
- Pour the urine sample from the foil dish into the sterile container.

Older children who are able to pass urine when asked can have a midstream urine (MSU) sample collected.

How to collect a MSU sample
- Wash the external genitalia with soap and water.
- Rinse and dry with a flannel or cloth.
- As your child passes urine in the toilet he/she can urinate into the foil dish or sterile urine jar half way through going to the toilet.

The specimen must be correctly labeled with the date, time of collection and your child’s surname, first name and date of birth to match the details on the request form. Place the specimen in the fridge in a plastic bag if unable to take the specimen to the GP, pathology laboratory or hospital within 30 minutes.

Before leaving the Emergency Department the doctor should specify where you will need to take your child’s urine specimen and who will follow up the results.

If you have any other concerns take your child to the GP or Emergency Department.