

Your Journey with Preventing Recurrent Urinary Tract Infections



For more information scan this QR code or go to <https://myhealth.alberta.ca/recurrent-uti-pathway>

Lower urinary tract infection (UTI) is an infection of the bladder caused by bacteria. Someone is diagnosed with **recurrent** lower urinary tract infections if you have 2 or more lower urinary tract infections in the last 6 months **or** 3 or more in the last 12 months.

You are the most important part of your healthcare team. This guide will help you to know what to expect as you work with your team to manage and prevent recurrent lower urinary tract infection. If you have any questions along the way, please ask your healthcare team. Click on the page numbers in blue if you want more information about the step in your journey along the way, please ask your healthcare team.

Before your appointment [\(page 5\)](#)

- Write down how you feel, your symptoms, and any questions or concerns.
- Consider bringing a family member or friend to support you.



Visit your healthcare provider [\(page 6\)](#)

- Share all of your symptoms and concerns. Your health includes physical, emotional, spiritual, financial, and social elements.
- To better manage your health condition, your healthcare provider needs to hear from you and understand who you are and what matters to you.
- You will have a pelvic exam where your healthcare provider will check for things that could be playing a role in your UTIs.



Get your tests [\(page 10\)](#)

- Most common tests include a urinalysis and urine culture
- Less common tests include an ultrasound or a CT of the abdomen



Review your test results [\(page 12\)](#)

- You may find some of your test results on MyHealth Alberta Account or MyChart or ask your healthcare provider to print them for you.
- Talk with your healthcare provider so you know what your test and assessment results mean and how they will help your team and you decide what to do next.



Review your treatment & prevention options [\(page 13\)](#)

- If needed, your healthcare provider will prescribe antibiotics to treat your UTI, based on your situation and the kind of bacteria they find in your urine.
- Your provider will also talk through different strategies to help prevent UTIs.
- Decide with your provider what will work best for you.



Start your treatment & prevention strategies and watch your symptoms [\(page 17\)](#)

- Take an active role in your treatment. If you have a change in symptoms or notice new symptoms, consider writing down what it feels like, the date, time, and what you were doing when they began.
- Make sure to tell your healthcare team if you have blood in your pee (urine), fever or chills, pain in your lower belly (abdomen) or back, if UTI symptoms don't get better within 2-3 days after starting treatment, or if you are pregnant and think you might have a UTI.



Talk with your healthcare provider about a referral [\(page 18\)](#)

- You may need a referral based on your specific needs.
- Ask who you are being sent to and what they do.
- Ask how long it will take to be seen and what you should do if you don't hear back.



Keep taking care of yourself [\(page 19\)](#)

- Keep taking care of your overall health.
- Look for other healthy-lifestyle resources and supports.



Whole-person health [\(page 2\)](#)

Important Tips:

Need to connect with with a primary care clinic?
ahs.ca/findaprovider

Need a translator?
Let your healthcare provider know

Need health advice?
Call Health Link at 811

Need to find programs and services in your community?
Call 211 or visit ab.211.ca



How to use this resource

Healthcare professionals, along with patient and family advisors in Alberta, wrote this pathway using the best available evidence. It is meant as general health information to help you know what to expect as you work with your healthcare team. Everyone has their own unique journey with lower urinary tract symptoms. This pathway does not replace the advice of a qualified healthcare provider. Always talk with your healthcare team and follow their recommendations for your specific care.

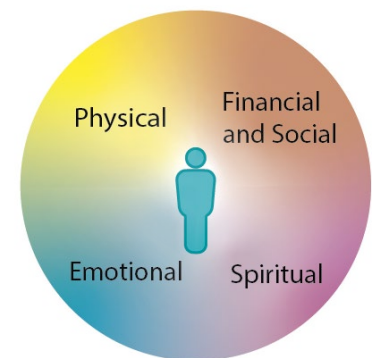
These pages are for you to use as needed. You can look through all of them at once or just the ones that help you now. Feel free to come back to the resource whenever you need it.

Whole-person health

The whole-person health approach will help you and your healthcare team better manage your health condition. It is drawn from the teachings of the medicine wheel.

Whole-person health means thinking about all parts of your health and wellness: physical, financial and social, spiritual, and emotional. All of these parts are connected and influence each other. It's important to be aware of your personal needs in each part and to share that information with your healthcare team.

- **Physical:** your specific health conditions and how well your body works
- **Financial and Social:** your ability to meet your housing, transportation, food, and health needs, feeling supported to manage your daily life, and having meaningful relationships
- **Spiritual:** your beliefs, sense of connection, and purpose
- **Emotional:** how you think, feel, and cope with life events



Whole-person health

Whole-person health also reminds us that we are all connected and work together: you, your support systems, and your healthcare providers. Your healthcare providers could be your doctor, nurse practitioner, or a team that comes together with you to plan and organize your care.

Your healthcare provider needs to understand who you are and what matters to you. This helps to build trust. But it can be hard to know what to share or what to say. Start by asking yourself:

“What are the things in my life that are important to me?”

“What are the things in my life that may be affecting my health and well-being?”



It is important to bring forward what matters to you. Here are some examples of things you may want to talk about with your healthcare provider:

Physical

“My symptoms are making it hard for me to do my job.”

“I find myself avoiding sex with my partner because I’m worried it will trigger a painful urinary tract infection.”

Financial and Social

“I’m worried I won’t be able to get to all of my appointments.”

“I need my daughter with me as a translator.”

“I’m not sure how I will pay for my medications this month.”

Emotional

“My urinary tract infections are unpredictable, and I find myself avoiding planning vacations and getaways because I fear I will get a urinary tract infection while away.”

“I have a lot of stress and I’m not sure how to manage it.”

“I feel frustrated that my urinary tract infections keep coming back”

Spiritual

“It’s important that I follow traditional healing practices.”

“How can I include my culture’s foods and family recipes in my nutrition plan?”

“It’s important that my religious practice of fasting is respected and brought into my care.”

What are recurrent lower urinary tract infections?

The urinary system is the network of organs and tubes that process and carry pee (urine) out of the body. The kidneys and ureters are called the upper urinary tract. The bladder and urethra are called the lower urinary tract.

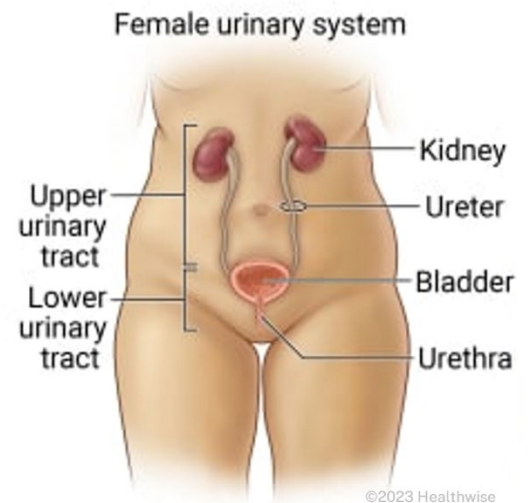
Lower urinary tract infection (UTI) is an infection of the bladder caused by bacteria. Most urinary tract infections happen in the lower urinary tract.

Some people get lower urinary tract infections often. You have **recurrent** lower UTIs if you have had 2 or more lower urinary tract infections in the last 6 months or 3 or more in the last 12 months.

This pathway is for adults (18 years old and over) with female urinary system who have recurrent lower UTIs (also called recurrent UTI throughout this document) and would benefit from learning about ways to help prevent them.

Symptoms of UTI may include:

- burning feeling when you pee (urinate)
- feeling like you have to urinate often
- feeling like you have to urinate right away when you get the urge
- Fever or chills
- Leaking urine (incontinence) that is new or worse
- Pain in the lower belly (abdomen) or back
- Blood in your pee



Before your appointment

Here are a few tips to help you get ready for your appointment with your healthcare provider:

- Make a note of all the times you have been diagnosed with or treated for a UTI.
- Consider using a symptom tracker to write down important information to share with your healthcare team about your symptoms.
- A symptom tracker can help you remember what symptoms you're feeling, when they started, how often they happen, and what makes them better or worse.
- Write down a list of your questions and concerns. When you're done, read your list and mark the most important things.
- Make a list of the prescription and non-prescription (over-the-counter) medicines you use, including any vitamins, herbs, and supplements.
- Ask someone you trust to go with you to your appointment. They can help you ask questions, write down instructions, and remember explanations.



Helpful tools and resources

- **Use a symptom tracker:** www.hqa.ca/wp-content/uploads/2025/07/HQA-2025-PIC-Symptom-Tracker-F-LowRes.pdf (Health Quality Alberta)
- To get the most out of your visit, plan to write notes during the visit or see the Alberta Health Services **My Care Conversations app** (ahs.ca/careapp) website for more information about recording your conversation with your healthcare provider.



Healthcare provider's assessment

Your healthcare provider will review your medical history and history of symptoms. Your healthcare provider understands that your UTI experiences can be hard to talk about, and they are there to support you. They may ask how recurrent UTIs have impacted the things that are important to you, like taking care of yourself, your job, your hobbies, and your sleep.

Your provider will also ask you some questions to help:

- understand your condition
- rule out other conditions,
- learn about things that might trigger your UTIs. For example, some people find that they get UTIs after having sex.

Factors that are important for your healthcare provider to be aware of when considering recurrent UTIs:

Medical history:

Some conditions are important for your healthcare provider to be aware of when considering UTIs:

- Chronic conditions, like diabetes and diseases that impact the brain and spine (neurological diseases)
- Kidney stones
- Perimenopause and menopause (hormonal changes, especially a loss of estrogen, may increase the risk of UTIs)
- Having a weak immune system
- Weak or damaged pelvic floor muscles, like from vaginal childbirth or past surgeries
- Cancer or radiation
- Previous pelvic or urinary system surgery
- History of trauma (like sexual assault or intimate partner violence)
- Changes in bowel habits (hard stool (constipation) can bother the muscles that control urination and loose stool can increase the risk of bacteria from stool entering the urinary tract)

Medicines and allergies:

- It's important for your healthcare provider to have a complete list of medicines you are taking. This includes prescribed medicines, over-the-counter medicines, and supplements. It is also important for them to know about any allergies you have.



Triggers:

- Sexual intercourse can trigger UTIs for some people. Factors like sexual activity, number of partners, and new partners may contribute to recurrent infections. Your doctor may ask about your sexual history to better understand your risk.
- If you think you notice other things that trigger your UTIs, share them with your healthcare provider.

Method of birth control:

- Use of spermicides or spermicide-coated condoms may raise the risk of recurrent UTIs.

Pelvic Exam

During this exam, your healthcare provider will check for conditions in your body that may impact your UTIs, like:

- differences in the structure of your urinary system, or
- pelvic organ prolapse, which is when a pelvic organ (such as your bladder) has moved from its normal position and is pressing against your vagina.

How a pelvic exam is done:

- Your exam will be done in a private room.
- You will be asked to remove your clothes from the waist down (in private) and will be provided with a gown or sheet to cover yourself.
- You will lie on your back on an exam table with your feet on footrests.
- Your provider will put on gloves and insert one or two fingers into your vagina. They will rest their other hand on your lower belly. This lets your provider feel your pelvic organs. You may feel some pressure when this is done.
- Your provider may need to use a speculum (instrument inserted into the vagina) to complete this exam.
- In some cases, your provider may put one gloved finger into your rectum and one into your vagina, to help check your pelvic organs.
- Be sure to tell your doctor if there is anything that can be done to help you feel more comfortable during the exam.

It's your right

You may be offered a chaperone like a nurse or a support person who is at the appointment with you. If a chaperone is not offered and you would like to have one, please let your healthcare provider know. You have a right to ask. If you feel uncomfortable or are in pain at any point, you always have the right to ask the provider to stop the exam. If you choose not to have a pelvic exam, your healthcare provider can suggest other ways to look into your recurring UTIs.



What should I watch for (symptoms of concern)?

Be aware of:

- burning feeling when you pee (urinate)
- feeling like you have to urinate often
- feeling like you have to urinate right away when you get the urge
- leaking urine (incontinence)
- not being able to fully empty your bladder (urinary retention)
- vaginal dryness

Contact your healthcare team if you:

- think there might be blood in your urine
- have fever or chills
- have pain in your lower belly (abdomen) or back
- have UTI symptoms that don't get better within 2-3 days after starting treatment
- are pregnant and think you might have a UTI

What should I share with my healthcare provider?

- What impact are your recurring UTIs having on things that are important to you, like your job, hobbies and interests, and relationships?
- What has worked for you in the past to manage or prevent recurring UTIs?
- What helps you work better with your healthcare team?
- What do you expect and need from the relationship with your healthcare provider?

There are lots of things in your life that can impact your ability to manage your health, like:

- Problems with money, housing, and access to transportation
- Alcohol or drug use
- Not enough support or help
- Childhood experiences

It's important to talk about these things with your healthcare provider because they all play a role in your health and well-being.

You are the most important part of your healthcare team.

If you don't understand what your healthcare team is telling you, let them know right away. Be open and honest. You might say:

“This is new to me. Could you please explain it slowly, using language that is easier to understand?”

“It sounded like you said that I should... Did I understand that correctly?”

“Can you show me a picture or model to help me understand?”



Helpful tools and resources

- Making the most of your appointment:
myhealth.alberta.ca/health/pages/conditions.aspx?Hwid=hw226888
- Working with your healthcare team: hqa.ca/info (Health Quality Alberta)



If you have symptoms of a UTI, your healthcare provider will order a urinalysis and urine culture. Your healthcare provider will ask you to get your urine tested every time you have symptoms of a UTI.

Testing and treatment for UTIs is not recommended if you do not have symptoms of a UTI, unless:

- you are pregnant
- you will be getting a surgery of your urinary tract
- you have multiple sclerosis, so you may feel new or worsening MS symptoms with a UTI
- you have a spinal cord injury, so you may not be able to feel signs of a UTI

Urinalysis

- A urinalysis checks your urine for different things, like white blood cells, protein, blood cells, and other substances. This helps determine if you have an infection or other problem in your urinary tract.
- You will need to pee into a urine container for this test.

Urine culture

- A urine culture is done to find out if your symptoms are caused by bacteria in the urine.
- It will identify the type of bacteria that is causing the infection (for example, *E. coli* is the most common).
- It can help determine the best treatment.
- You will need to pee into a urine container for this test.

Looking for more information about these tests? Visit myhealth.alberta.ca and search for:

- "[Urinary tract infections: Urine testing and when to treat a urinary tract infection \(UTI\)](#)"
- "[Urine Test](#)"
- "[Urine Culture](#)"

These resources will help you learn more about:

- When to treat a UTI.
- How to collect a clean-catch midstream urine sample.



- What your results mean.
- More about these tests and watch a video with more information.

In a small number of cases, your healthcare provider may want to rule out something else, like blood infection, kidney stones, or differences in the structure of your urinary tract. In these cases, they may order additional tests:

Ultrasound of the kidneys and bladder

- An ultrasound is a test that uses sound waves to take pictures of your kidneys and bladder.
- During the test, a small hand-held device called a transducer is gently moved over the area of the kidneys and bladder. It sends sound waves to a computer, which creates images of these organs. A gel is applied to the skin to help the sound waves travel.
- Learn more by visiting myhealth.alberta.ca and searching “ultrasound.”

Computed Tomography (CT) scan

- During the test, you will lie on a table that is attached to the CT scanner, which is a large doughnut-shaped machine. The CT scanner sends X-rays through the body area being studied to create pictures. In some cases, a dye (called contrast material) may be used to make structures and organs easier to see on the CT pictures.
- Learn more by visiting myhealth.alberta.ca and searching “CT scan.”



Review your test results

It is important to know what your test results are and what they mean for you personally. Take time to discuss your results with your healthcare provider. Medical terms can be hard to understand. And even common words like “positive” or “negative” might mean something different for medical tests. Ask your healthcare provider for explanations and examples to make sure you fully understand.

You might ask:

“What does this mean for me?”

“Is there a current concern? If so, what is it?”



Helpful tools and resources

You may find some of your results and health information using secure online tools:

MyHealth Alberta Account

See your lab results, immunizations, and some other results with a MyHealth Alberta account. Sign up at myhealth.alberta.ca/account

MyChart

See your health information, manage some appointments, and interact directly with some members of your healthcare team. Ask your healthcare provider how to access your MyChart account. Learn more at ahs.ca/mychart.





Review your treatment and prevention options

If you have an active UTI, your healthcare provider will help you find the most appropriate treatment option for you based on your symptoms and the results of your urine culture.

Medical treatment

Remember, treatment is not needed if you do not have symptoms of a UTI, unless:

- you are pregnant
- you will be getting a surgery of your urinary tract
- you have multiple sclerosis or a spinal cord injury, which may make UTIs more common and change symptoms when infection occurs

Treating a UTI when you don't have symptoms can do more harm than good. It can lead to antibiotic overuse, which can make antibiotics less effective, and can cause side effects, including a serious gut infection called *C. difficile*, which can cause symptoms like watery diarrhea, belly cramping, fever, and dehydration.

Antibiotics

- Antibiotics are medicines used to kill bacteria, like those that cause UTIs.
- Your healthcare provider will prescribe the right antibiotic for you, based on your situation and the kind of bacteria found in your urine.
- It is important to take your antibiotics as prescribed and to complete the full course, even if you start feeling better before they are done.
- In some cases, self-start treatment may be an option for those with recurrent UTIs. With self-start treatment, your healthcare provider will give you a prescription for antibiotics ahead of time, and if you develop symptoms, you can start the antibiotic right away. Discuss the benefits and risks of this option with your healthcare provider to see if this option is right for you.

Asking the following questions can help you make an informed decision about your antibiotic options and decide what will work best for you:

“What are the advantages and disadvantages of this option?”

“How will this make me feel? Will it have side effects?”

“What results can I expect and in what timeframe?”

“What if the treatment doesn't work?”



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Preventing recurrent urinary tract infections

Dealing with recurrent UTIs can feel isolating and stressful, and can impact your daily life and the things that are important to you. Luckily, there are several options to help prevent recurrent UTIs.

Hydration: Aim for 2 to 3 litres of water per day.

Regular voiding: Don't hold in your urine. Empty your bladder fully when you have to urinate.

Vaginal estrogen: If you have perimenopause or have entered menopause, vaginal estrogen can help reduce recurrent UTIs.

- The *International Urogynecological Association - Your Pelvic Floor* offers information for patients on vaginal estrogen therapies:

yourpelvicfloor.org/conditions/low-dose-vaginal-estrogen-therapy/

Busting Myths

Recurrent UTIs are not caused by poor hygiene, and there is no clear association between recurrent UTIs and:

- peeing (urinating) habits before and after sex
- wiping direction
- urinating frequency
- douching
- use of hot tubs
- use of pantyhose or tights
- BMI (body mass index)

Pelvic floor exercises:

- Some people with recurrent UTIs might have a problem with the muscles of their pelvic floor, which could make recurrent UTIs more common.
- If you have persistent pain or other issues related to the urinary tract (like leaking urine or increased frequency of urinating even without having a UTI), please speak to your healthcare provider. They may recommend being assessed by a pelvic floor physiotherapist to see if pelvic floor muscle training could help.
- Many people need help learning how to do pelvic floor muscle training properly. Seeing a pelvic floor physiotherapist is a great way to get the support you need.
- You can make an appointment for yourself at a private pelvic floor physiotherapy clinic. If you need help finding a clinic, the AHS Rehabilitation Advice Line (1-833-379-0563, Monday to Friday, 9 a.m. to 5 p.m.) can help you find options near you. You can also visit cpta.ab.ca to find a pelvic floor physiotherapist.

Cranberry:

- Cranberry products come in different forms, such as juice, tablets, and powder.
- It is not clear which type or dose works best. Cranberries are thought to help prevent recurrent UTIs because they contain a natural substance called proanthocyanidins (PACs).
- A common daily amount of PACs recommended for prevention is 36 to 72 mg.
- Cranberry products are not all made the same, and PAC amounts are not always listed on the label. In general, a reasonable option is:
 - 1 cup (8 oz) of cranberry juice once or twice a day, or
 - 500 to 1000 mg of cranberry tablets per day.
- If choosing cranberry juice, look for unsweetened cranberry juice, not cranberry cocktail. Unsweetened juice has less sugar and more of the helpful PACs.
- Cranberry juice can be high in sugar and calories, so it may not be a good choice for everyone.

Methenamine hippurate:

- Methenamine hippurate kills bacteria in the urine. One way it does this is by making the urine more acidic.
- It may be used as a prevention option for recurrent UTIs.
- In Canada, methenamine hippurate needs to be custom-made by a pharmacist or bought online. This can make the medicine more expensive to buy. Check with your benefits plan to learn if you are eligible for coverage.
- This medicine should not be combined with antibiotics (especially Sulfa drugs) to prevent infection.
- This medicine is not for everyone, such as people with kidney or liver problems, severe dehydration, or gout. Talk to your healthcare provider to see if this medicine is a good option for you.

Prevention options without clear evidence:

The following options do not have clear evidence to support their use, but they have low risk of causing harm, so some people may want to try them to see if they help:

- **Avoid spermicides and spermicide-coated condoms:** Spermicides can change the balance of healthy bacteria in the vagina. Remember to consider other options for birth control and for preventing sexually transmitted infections if you stop using spermicide-coated condoms (for example, consider using condoms that don't have spermicides).



- **Probiotics:** Probiotics are healthy bacteria that help promote a healthy balance of good bacteria in the body.
 - *Lactobacillus* probiotics seem to be important in keeping your vagina and urinary tract healthy, but the best dose and route to take them isn't clear.
- **D-mannose:** D-mannose is a natural sugar that is thought to stop bacteria from attaching to bladder cells. Because there isn't clear evidence of it being effective, it isn't clear what dose is best to take.

If your UTI symptoms happen often or are hard to manage, your healthcare provider may suggest preventive antibiotics (called antibiotic prophylaxis).

Antibiotic prophylaxis

- Antibiotic prophylaxis is the use of antibiotics when there isn't an active UTI, to help prevent recurrent UTIs.
- Typically, you will try antibiotic prophylaxis for 6 to 12 months.
- You should continue using non-antibiotic strategies listed above even when on antibiotic prophylaxis (except for Methenamine, which should not be used with antibiotics, especially Sulfa drugs).
- If sex is a clear trigger for your recurrent UTIs, your healthcare provider may recommend a single-dose of antibiotic to be taken right before or after having sex.
- If you start to develop symptoms of a UTI while on antibiotic prophylaxis, tell your healthcare provider. They will order a urinalysis and culture to confirm an active UTI and will order different antibiotics for you to take.

Antibiotic prophylaxis comes with risks, like:

- side effects – for example: fever, rash, diarrhea, nausea, vomiting, headache
- vaginal yeast infections
- antibiotic resistance (where antibiotics become less effective)
- changes to the balance of healthy bacteria in the body
- gut infections like *C. difficile*.

Because of this, antibiotic prophylaxis should only be considered if you are having many recurrent UTIs that are very bothersome and impacting your quality of life. **Non-antibiotic options should always be considered first.**



Start your treatment and prevention strategies and watch your symptoms

If the chosen options don't work the way you thought they would, talk with your healthcare provider to discuss other treatment options that may work for you.

Be aware of:

- burning feeling when you urinate
- feeling like you have to urinate often
- feeling like you have to urinate right away when you get the urge
- incontinence (leaking urine)
- urinary retention (not being able to fully empty your bladder)
- vaginal dryness.

Contact your healthcare team if you:

- think there might be blood in your urine
- have fever or chills
- have pain in your lower belly (abdomen) or back
- have UTI symptoms that don't get better within 2-3 days after starting treatment
- are pregnant and think you might have a UTI.

Watching your symptoms is important. Call your healthcare provider or Health Link at 811 if you have any concerns. You might feel like you don't want to bother your healthcare team, but no detail is too small to share. If it matters to you, it will matter to your healthcare team.

You can clarify with your healthcare team what to expect in terms of follow-up communication. Connect with your healthcare team whenever you:

- Have questions.
- Notice your symptoms are coming back or getting worse.
- Have problems with your medicine.
- Haven't gotten test results or heard back about an appointment in the time you had agreed to.



Helpful tools and resources

If you can't reach your healthcare provider and need health advice or information, call Health Link anytime, day or night, by dialing **811**.





Talk with your healthcare provider about a referral

Most often, you and your healthcare provider will be able to work together to find prevention strategies that will work for you to reduce your recurrent UTIs. If you've tried the prevention strategies for 6 to 12 months with little success, your healthcare provider may suggest a referral to:

- **Infectious Disease Specialist:** Medical doctors who specialize in the diagnosis and treatment of complex infections. They also treat people who have long-term (chronic) infections or disorders.
- **Urologist:** A doctor who specializes in the urinary tract.

Your specialist will meet with you to discuss your health concerns and look at your test results. The specialist may diagnose your concern, order more tests, or discuss treatment and management options with you.

You can find out more about the referral criteria for a specialist by asking your healthcare provider.



Helpful tools and resources

To learn about how to prepare for your specialist appointment, check out the QuRE Patient and Caregiver Journal by visiting ahs.ca/quire.



Living with recurrent UTIs can make you feel alone and stressed. Recurrent UTIs are not your fault and you are not alone. Millions of people experience UTIs and about 3 in 10 women who have a UTI will have another. Taking steps to prevent recurrent UTIs is possible, and your healthcare team is here to support you every step of the way.

There are many different things that can impact your health and wellness. It is important to be able to work with your healthcare team to decide what is best for you in your life, given your own unique circumstances, as you manage your recurrent UTIs.

Remember, you don't need to do everything all at once. Take realistic and manageable steps in your health and wellness. Consider why making a change may benefit you and the things that matter to you. And if you try something and it isn't working as expected, try a different strategy.



Helpful tools and resources

Find programs and resources in your community:

211 connects Albertans to the programs and resources they need, anytime, day or night. Whether you're looking for help with mental health, financial assistance, basic needs, or other challenges, 211 is here to help you find supports. It's free, confidential, and available in over 170 languages by phone, making it easy to access help when you need it. To connect with **211 Alberta**:

- Call 211
- Text INFO to 211
- Chat or search at ab.211.ca

The **Alberta Healthy Living Program** offers free workshops, classes, and supervised exercise and nutrition services to adults living with a variety of chronic conditions and diseases. Many education classes and workshops are available province wide. Learn more by visiting ahs.ca/ahlp.

Chronic Disease Management programs:

www.primarycarealberta.ca/page14143.aspx#chronic-disease-management

Health Information & Tools: myhealth.alberta.ca/Pages/HealthInfoToolsDefault.aspx



Resources

There's lots of information out there, and it can be confusing to know what information is accurate and true. Here are some great resources that may be helpful for you.

Recurrent UTI Patient Resources

- **International Urogynecological Association - Your Pelvic Floor:** offers information for patients on vaginal estrogen therapies [Low-Dose Vaginal Estrogen Therapy](#)
- **Urology Care Foundation:** www.urologyhealth.org/urology-a-z/u/urinary-tract-infections-in-adults
- **MyHealthAlberta** – myhealth.alberta.ca, search “[Urinary tract infections: Urine testing and when to treat a urinary tract infection \(UTI\)](#)”

Pelvic Floor Physiotherapy Resources:

- **Find local pelvic floor resources on the Adult Community Rehabilitation website:** www.albertahealthservices.ca/rehab/Page15329.aspx
- **Pelvic floor therapy - how to find a pelvic floor therapist:** cpta.ab.ca. You can also call the AHS Rehabilitation Advice Line (1-888-379-0563 Monday to Friday 9 a.m. to 5 p.m.)
- **Pelvic Health Physiotherapy webinars:** myhealth.alberta.ca/Alberta/Pages/Pelvic-HealthPhysiotherapy-Webinars.aspx

Get help now:

- **Emergency: Call 911**
- **Health Link: Call 811**

Mental health, addiction, and crisis support:

- 811 or [Addiction Helpline](#): 1-866-332-2322
- 811 or [Mental Health Helpline](#): 1-877-303-2642
- Crisis Text Line: Text CONNECT to 741741
- Suicide Crisis Helpline: Call or text 988 or visit 988.ca

Helpful tip

If you can't print this resource at home, ask a family member, friend, or your healthcare provider to print it for you. You can also use a computer and printer at your local library.

Community and social supports:

- 211 Alberta: Call 211, or visit ab.211.ca
- Family Violence Info Line: 310-1818, or visit alberta.ca/family-violence-find-supports
- Income Support: 1-866-644-5135, or visit alberta.ca/income-support



Alberta Health Services programs:

- Home Care: ahs.ca/homecare
- Find a Dietitian: ahs.ca/nutrition
 - Health Link has dietitians to answer nutrition questions. Call Health Link at 811 and ask to talk to a dietitian or complete the self-referral form on ahs.ca/811.
- Spiritual Care Services: ahs.ca/spiritualcare
- Support to quit smoking: albertaquits.ca

Primary care (family doctors and nurse practitioners):

- Find a doctor or nurse practitioner: www.albertafindaprovider.ca
- Virtual care guide: ahs.ca/virtualhealth

Patient concerns and feedback:

- Office of Alberta Health/Mental Health Patient Advocates: alberta.ca/office-of-alberta-health-advocates
 - Offers coaching to help you advocate for yourself in the health system, and support to learn how the health system works and how to navigate through it.
- Alberta Health Services Patient Relations: 1-855-550-2555, or visit ahs.ca/patientfeedback

Important phone numbers

Name or clinic name:

Phone number:

Name or clinic name:

Phone number:

Name or clinic name:

Phone number:

Notes

Use this space to take notes.

About this Pathway

The Provincial Pathways Unit co-developed this patient pathway in partnership with:

- Patient and family advisors
- Urology and Infectious Disease specialists
- Primary care providers

It is current as of June 2026.

Authors & Conflict of Interest Declaration

This pathway was reviewed and revised by a multi-disciplinary co-design team including specialists and primary care providers from across Alberta. Membership available on request by emailing albertapathways@primarycarealberta.ca.

Pathway Review Process

Patient pathways undergo scheduled review every three years, or earlier if there is a clinically significant change in knowledge or practice. The next scheduled review is October 2029.

However, we welcome feedback at any time. Please send us your [feedback here](#).

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Disclaimer

This pathway represents evidence-based best practice but does not override the individual responsibility of healthcare professionals to make decisions appropriate to their patients using their own clinical judgment given their patients' specific clinical conditions, in consultation with patients/alternate decision makers. The pathway is not a substitute for clinical judgment or advice of a qualified healthcare professional. It is expected that all users will seek advice of other appropriately qualified and regulated healthcare providers with any issues transcending their specific knowledge, scope of regulated practice, or professional competence.