

## Emergency Referral Pathway for Ureteric Colic

Severe Unilateral Flank Pain Radiating to Groin / Genitalia With Evidence of Visible or Non visible Hematuria (Non visible Hematuria may be absent in 10 -15 % of Cases)

**NO**

**YES**

### ALTERNATE DIAGNOSIS

AAA (Age >50 – High Risk)  
Ectopic Pregnancy  
Musculoskeletal Skeletal  
Pulmonary  
Bowel  
Gynaecological

### EXAMINATION / ASSESSMENT

Pulse  
Blood Pressure  
Temperature  
Abdominal Examination  
Scrotal Examination  
Pain Score  
Possible Pregnancy  
Social Needs

### INVESTIGATION

Urine Dipstik  
MSU  
FBC  
U&Es  
Amylase  
Pregnancy test  
CT KUB – Non Contrast

### ANALGESIA

Diclofenac 100mg PR (if no contra indications)  
Paracetamol 1gm IV/O  
Codeine  
Opioids (not a substitute for NSAIDS)  
Entonox

### RED FLAG SIGNS

Symptoms/Signs of Systemic Illness  
Low Blood Pressure  
High Temperature (>38 deg C)  
Anuria  
Abnormal Renal Function  
Solitary Kidney  
Persistent Pain

Men > 50 years of age especially with no previous renal tract stones and female patients in the reproductive age group should not be managed within the pathway until AAA is considered or pregnancy excluded

**Normal Working Hours**  
Mon- Fri 8.30 – 20.30  
Sat- Sun 8.30 -17.30

Emergency Department to Discuss with Radiology and arrange CT abdomen- non contrast

+VE CT for stone & Symptomatic

Urology Referral

+VE CT & Asymptomatic

>5mm Stone  
Discuss with Urology

+VE CT & Red Flag Sign

<5mm Stone  
Discharge with Alpha Blocker  
NSAIDS  
Urgent Urology Outpatient Referral

-VE CT

Urgent Urology Referral

Referral Back to GP

CT Abdomen – non contrast and referral to Urology or Surgery as appropriate

**Symptomatic Patients**  
Discuss with Radiology

**Asymptomatic Patients <50 yrs of age with No Red Flag Signs**

Emergency Department to Make Urgent Outpatient Referral to Urology and request an Urgent Outpatient CTKUB (Under the on-call Urology Consultant's name)

CT REQUESTING IN SUSPECTED URETERIC COLIC

**Out of Hours**