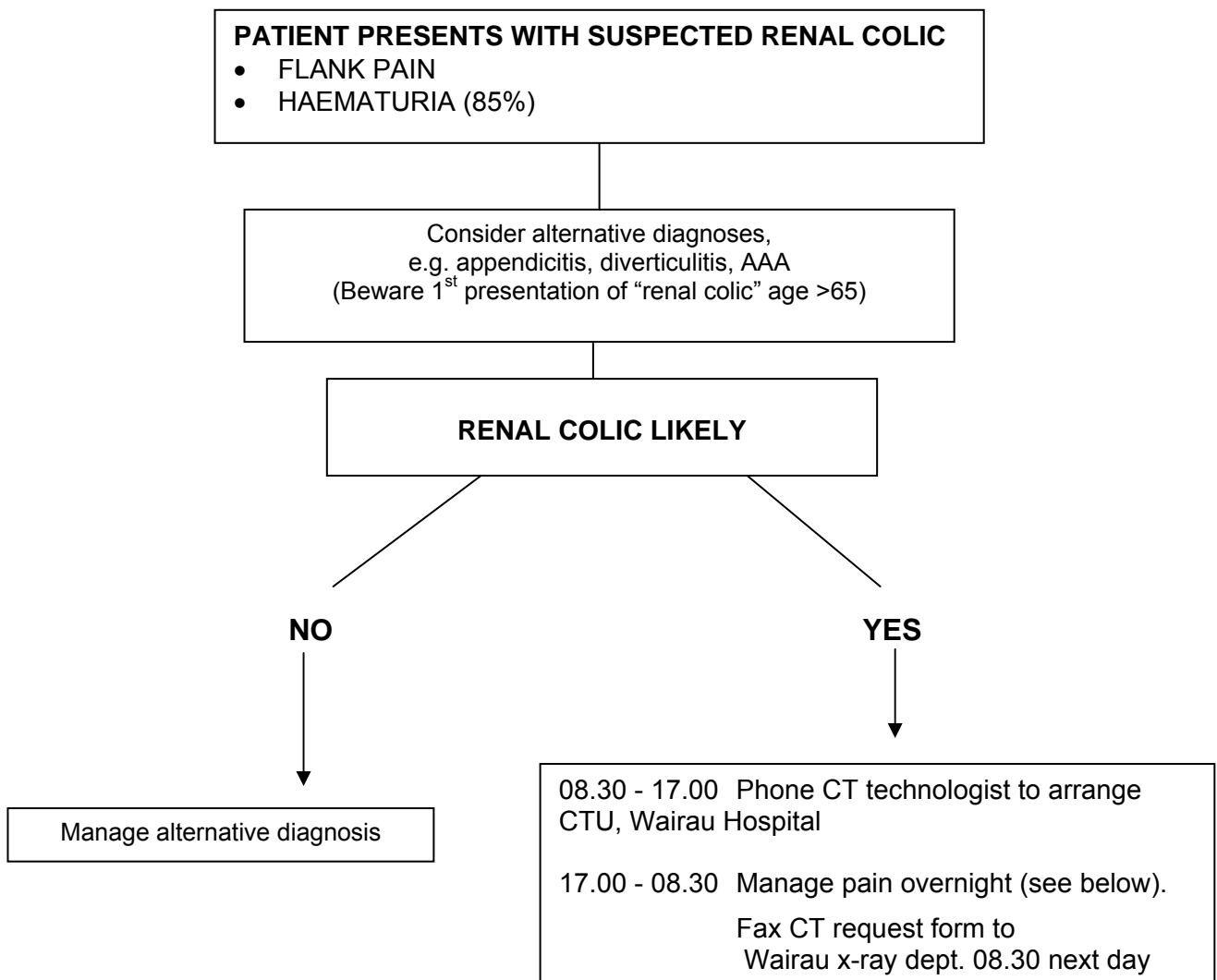


MANAGEMENT OF SUSPECTED RENAL COLIC - Marlborough



Management while waiting for CTU:

- analgesia (NSAID IM +/- oral unless contraindicated)
- α blocker (doxazosin 1mg daily)
- beware signs of infection
- admit if pain uncontrollable

Management after CTU:

- Small ureteric stone (<5mm) can be allowed to pass
 - continue analgesia PRN and α blocker (increase to 2mg daily if able)
 - beware signs of infection
 - sieve urine
 - provide renal stone patient info (fluid intake, dietary modification etc)
 - request follow-up CT at 6/52 (or KUB alone if stone was visible on x-ray)
- Refer to urology outpatients
 - if stone >5mm
 - more than one stone present
 - renal calculus
 - stone fails to pass after 6/52
 - Refer as appropriate for other pathologies