

Suspected ureteric colic - primary care referral guidance

NHS Forth Valley

ACUTE COLIC

Patient at home with uncontrolled pain / sepsis/ single kidney / etc

Action: urgent admission

SEMI URGENT

e.g. good history / non-visible haematuria / pain settles on diclofenac

Action: Urgent SCI gateway referral to urology who will then arrange CT KUB and review

NON-ACUTE

Non-acute presentation with non-visible haematuria

Action: refer via non-urgent NVH pathway.

If no blood on urine dipstick - renal USS in primary care

Abnormal USS: - Urology referral

Normal USS : - Unlikely to be urology issue so consider other referral.

A urologist is always available to discuss cases – please contact us through the FVRH switchboard.

Referral guidance provided by Mr C McIlhenny, Consultant Urologist, FVRH.
28th March 2016