

NEPHROLITHIASIS

CDU INCLUSION CRITERIA

- Stable vital signs
- Documented kidney stone by CT or US
- Persistent symptoms despite appropriate ED therapy
- Time of day is 7pm-7am (between 7am and 7pm consult urology immediately if patient has failed ED treatment)

CDU EXCLUSION CRITERIA

- Unstable vital signs
- Pt with any of the following (if present, consult urology immediately)

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| <ol style="list-style-type: none">1. Signs or symptoms of infection (fever, leukocytosis, UA suggestive of infection)2. Acute kidney injury (Serum Cr >1.3 or >1.5x patient's baseline if known)3. Solitary kidney4. Bilateral obstructing stones5. >2nd visit to the emergency department |
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- Pregnancy (if pt is pregnant, consult OB/GYN)
- Transplanted kidney (if pt has transplanted kidney, consult transplant service)
- Inability of patient to perform ADL's

CDU INTERVENTIONS

- Serial vital signs and re-evaluation
- Analgesic and antiemetic medications, goal to transition from IV to PO medications
- Tamsulosin 0.4 mg daily (administer STAT dose if patient has not already received in ED)
- IV fluids
- NPO with transition to diet as tolerated

CDU DISPOSITION

Home

- Pain resolved or significantly improved and controlled with PO medications
- Stable vital signs
- Tolerating adequate PO
- Adequate follow up plan established: pt to call urology clinic at 773-1728; follow up will be arranged within 1 week

- Discharge medications:
 - Ibuprofen and Acetaminophen
 - Narcotic pain medications as needed
 - Antiemetics as needed
 - Tamsulosin 0.4 mg daily for 14 days

Admit/urology consultation

- Patient with continued IV pain medication requirement
- Patient unable to tolerate PO
- New positive findings that require hospitalization
- EM provider discretion