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)
  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 kidney
  4. Bilateral obstructing stones
  5. >2nd visit to the emergency department
- 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:
  o Ibuprofen and Acetaminophen
  o Narcotic pain medications as needed
  o Antiemetics as needed
  o 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