

RENAL COLIC

Transfer Criteria

Diagnosis of renal colic established by helical CT, IVP or ultrasound
Persistent pain or vomiting despite medication
Acceptable VS
Urology resident notified

Exclusion Criteria

Unstable VS
Associated fever, UTI, pyelonephritis, or sepsis
Relative - large proximal stone >5mm with high grade obstruction
Solitary kidney

Potential Intervention

IV Hydration
Parenteral narcotics, toradol
Parenteral antiemetics
Diagnostic tests - Delayed IVP films, ultrasound
Serial exams and vital signs
Strain urine, stone analysis, U/A if not yet done
Urology consultation

Disposition

Home - Acceptable VS
Pain and nausea resolved or controlled
Passage of stone

Hospital - Persistent vomiting or uncontrolled pain after 16 hours
Diagnosis of coexistent infection
Change in diagnosis requiring further therapy or workup