

**Renal & Urological**

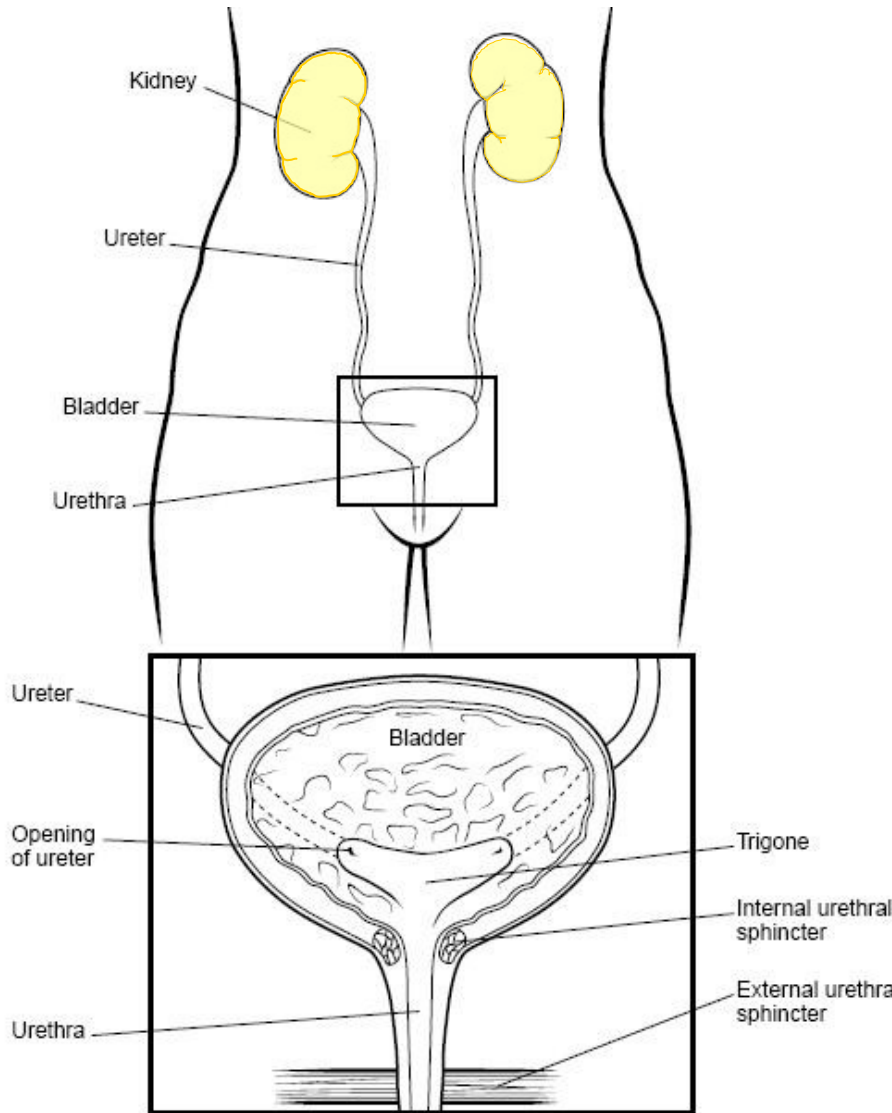
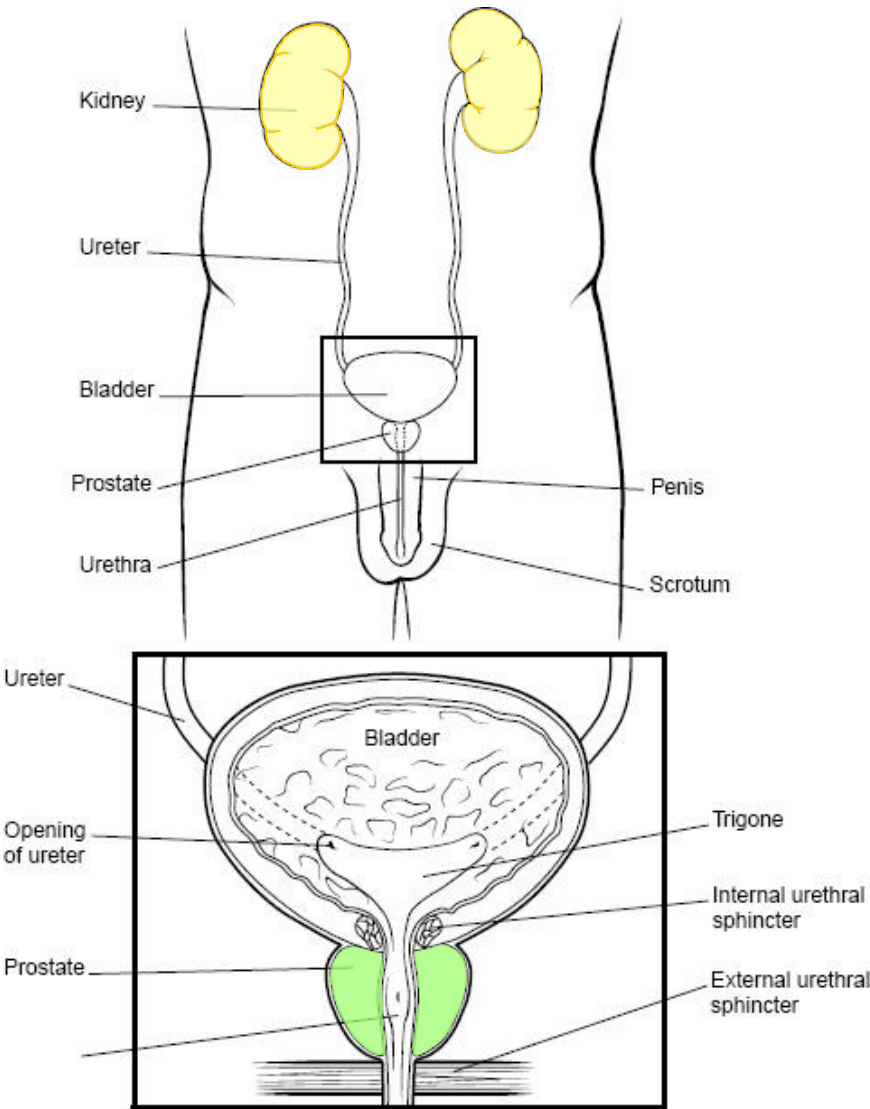
**Referral Patterns**

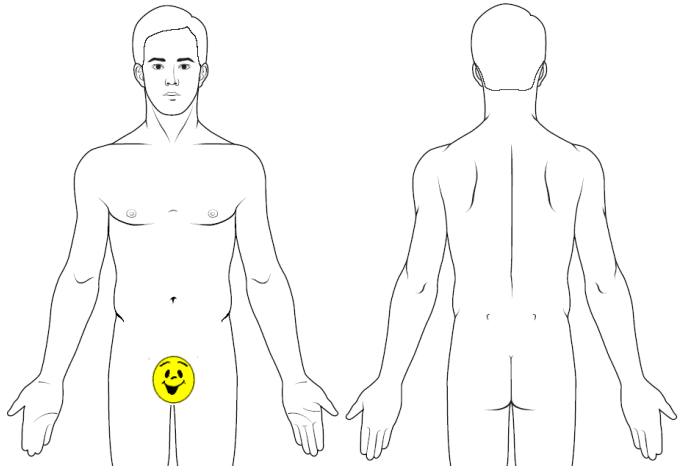
**&**

**Follow Up Questions**

# Quick Anatomy Review

Use this section to draw in **Common Pathologies** affecting the Kidney & Urological Fields

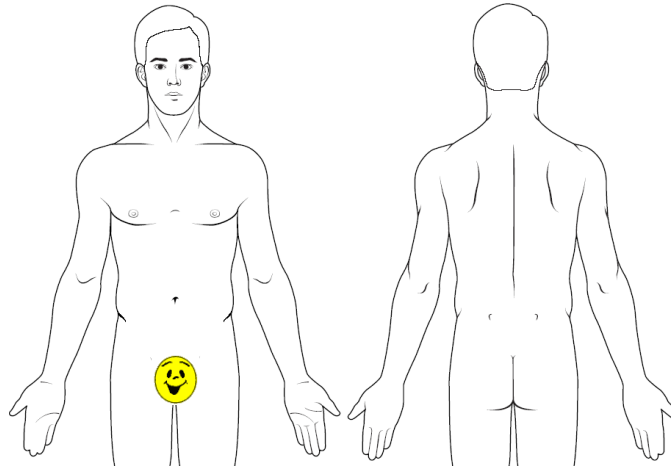




### Cystitis

Increased peeing / urgency  
Dysuria (painful peeing)  
Haematuria (bloody peeing)  
Low back / lower abdominal / pelvic pain  
Dyspareunia (painful sex)  
Dip stick Urinalysis  
    Bacteriuria (bacteria)  
    Pyuria (WBC)  
Obs: Cloudy / red

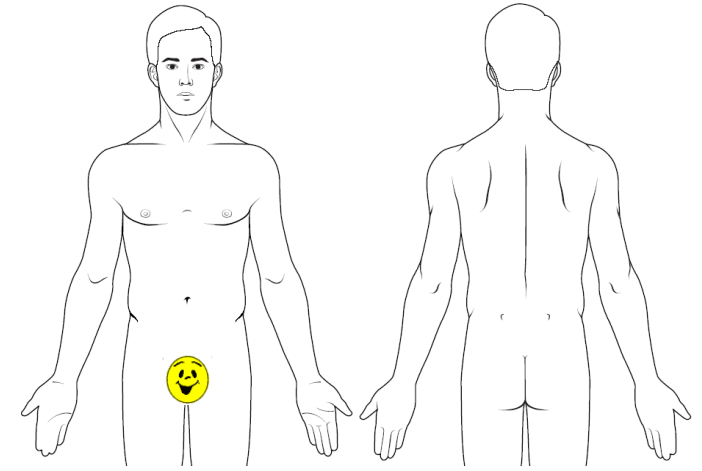
Notes:



### Urethritis

As Cystitis

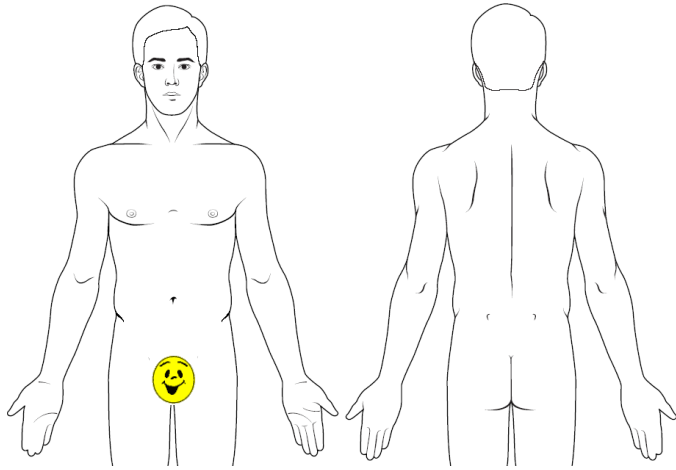
Notes:



### Upper Urinary Tract Infection

Flank Pain  
Unilateral costovertebral tenderness  
Fever & chills  
Skin hypersensitivity  
Haematuria  
Pyuria  
Bacteriuria

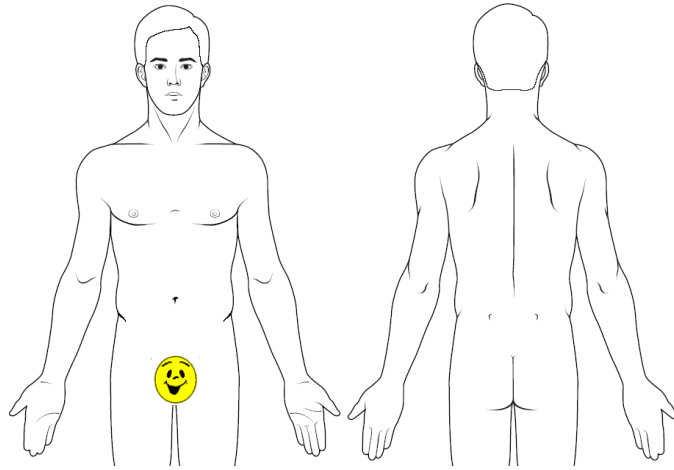
Notes:



### Renal Impairment

- ↑BP ↓Urinary output
- Weakness
- Anorexia
- Dyspnoea
- Mild headache
- Proteinuria
- Altered blood biochemistry

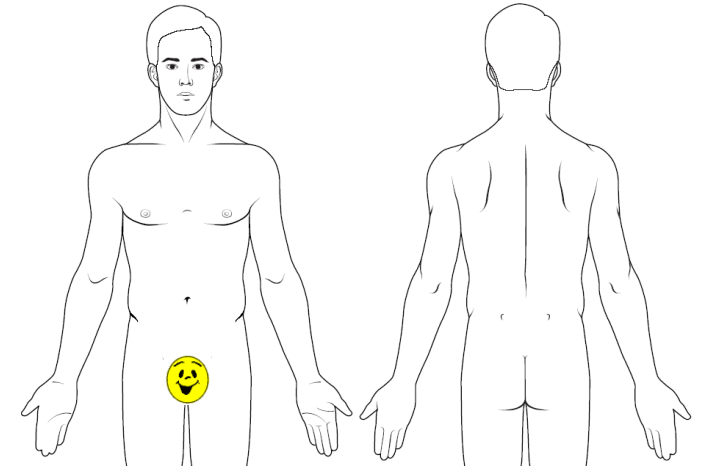
Notes:



### Obstruction of the Upper Urinary Tract

- Pain (depends on the location of stone/mass)
  - Acute, spasmodic, radiating
  - Mild & Dull flank pain
  - D/L Pain
  - Abdominal muscle spasm
- Hypersensitivity over T10 - L1
- Nausea & vomiting
- Fever & chills
- Renal impairment / Haematuria / palpable flank mass

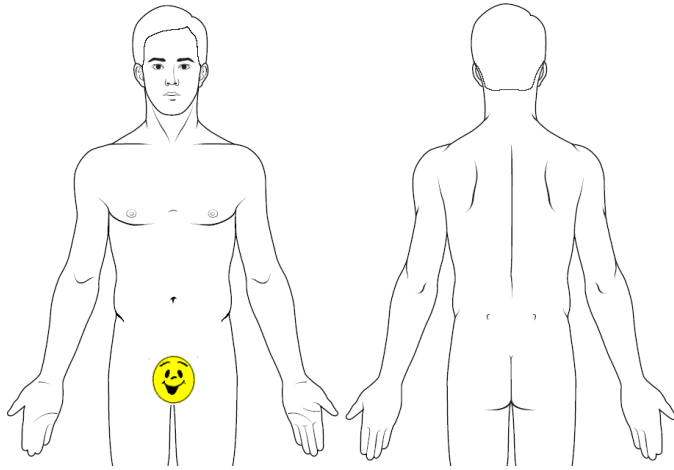
Notes:



### Obstruction of the Lower Urinary Tract

- Palpable bladder, Suprapubic or pelvic pain
- Difficulty emptying bladder
- Hesitancy
- ↓urine output when voiding
- Lower abdominal discomfort and a feeling of needing to go....
- Nocturia (bed wetting)
- Haematuria
- Low back, pelvic and or femur pain

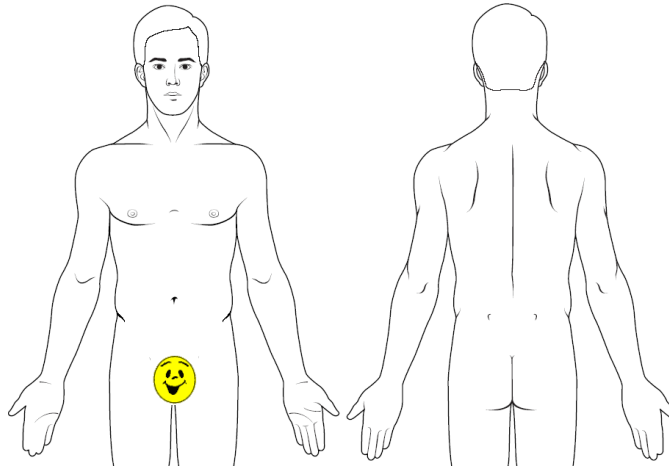
Notes:



### **Prostatitis**

- Myalgia
- Arthralgia
- Sudden high fever & Chills
- Dysuria
- Nocturia
- Low back pain & perineal pain

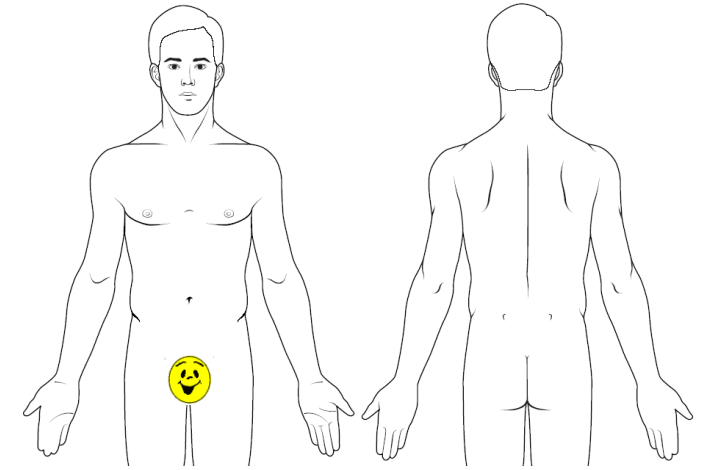
Notes:



### **Benign Prostatic Hypertrophy**

- Slow start or delayed start to flow
- Weak stream
- Dribbling
- Urgency
- Nocturia
- Urinary retention
- Incontinence
- Dysuria
- Haematuria

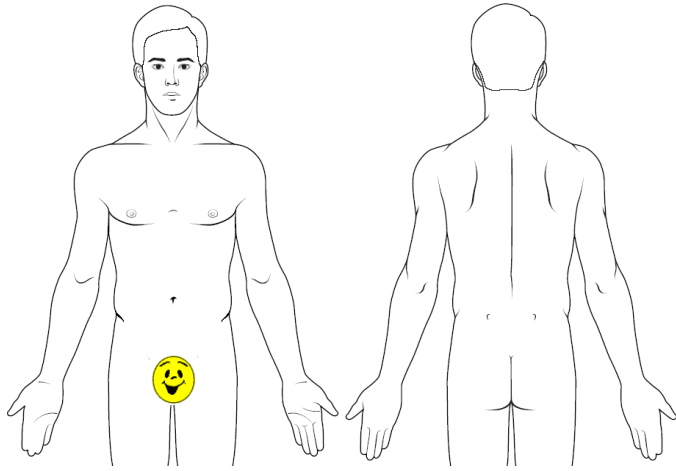
Notes:



### **Prostatic Cancer**

- Hesitancy
- Dribbling
- Retention
- Dysuria
- Pain on ejaculating
- Low back pain
- Pain on defecation
- Nocturia/ incontinence
- Haematuria

Notes:



### **Kidney Stones**

Flank pain or back pain (1 or both sides)

Progressive, severe, colicky

May rad to genitals / groin / pelvis

Nausea / Vomiting

Frequency / urgency / in

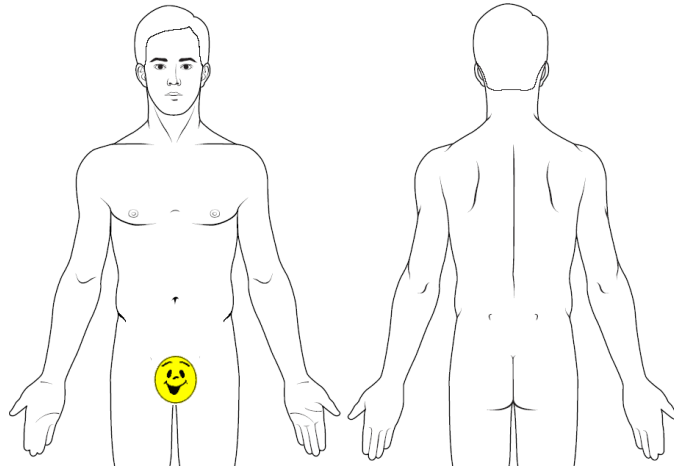
Haematuria

Dysuria

Fever & chills

Nocturia

Notes:



### **Renal Cancer**

Haematuria

Dark , rusty or brown

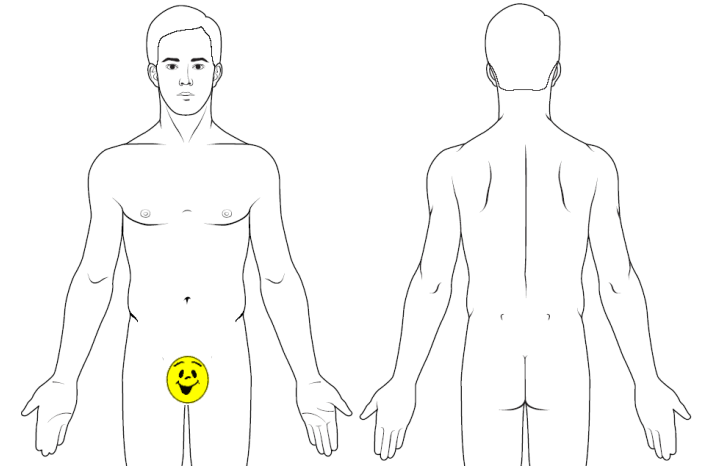
Flank pain

Abdominal & back pain

Weight loss

Abdominal mass

Notes:



### **Bladder Cancer**

Hamaturia

Frequency, urgency, incontinence

Dysuria

Abdominal pain

Weight loss

Lethargy

Anaemia

Bone pain

Notes:

**Follow up questions within the Kidney & Bladder fields:**

Any Changes in your urination habit?

Yes.. Increased/decreased frequency? Over what time frame...(recent suggests infection)

Do you have a sense of urgency?

Do you have difficulty starting to pee? (**obstruction**)

Do you have difficulty stopping a flow? (**obstruction**)

Do you get up per night to pee? How many times? (Prostate)

Do you notice that you dribble during peeing, or leak or have trouble holding onto your urine? (**urinary incontinence, obstruction**)

Have you noticed any change in colour?

Yes.. Red, dark brown, blood?

Do you have any pain as you pee? (**infection**)

Do you have any pain as you ejaculate?

Any pain or discomfort in you groin, genital area or lower abdomen?

Yes.. What relieves? What aggravates?

Any pain in your flank or just above your pubic bone?

Yes.. Is this pain relieved by movement / changing position? (**Renal colic not relieved by mvt**)

Yes.. What relieves? What aggravates?

Have you had any discharge (penis / vaginal) with this pain?

Ever had any problems with your kidney's or bladder

Yes.. **What, When, Who, Why, How & Treatment offered, resolved/Managed?**

Have you ever injured your bladder/kidney's

Yes.. When, How was it treated? Has it resolved?

Have you ever suffered with bladder/kidney stones?

Have you had any kidney/ bladder infections?

Yes.. How was it treated?

Was it related to any other specific circumstance? Eg unprotected sex, pregnancy, STD..

Have you had any discharge (penis / vaginal) with this infection

What surgery (if any) have you had on your bladder/kidney?

Yes.. **What, When, Who, Why, How & Treatment offered, resolved/Managed?**

Have you ever had problems with your prostate?

Follow up with you urgency / hesitancy, Nocturia, Haematuria etc....

Have you had any inguinal hernias? (DD source of groin pain... also check for hydrocele)

How much do you drink daily? **(Excluding alcohol)**

Has your flow changed in size and pressure? **(obstruction/ prostate)**

Do you feel like your completely empty when you finishing peeing? **(enlarged bladder secondary to prostate enlargement / obstruction)**

Do you accidentally leak when you laugh, bear down or cough? **(stress incontinence)**

## Case History Study

A 61 year old office worker presents with low back pain without any radiculopathy. He describes the PMI as focusing centrally between L1 - 5.

When prompted about associated symptoms he also described a mild low grade discomfort in his lower abdomen described as a 2 on a VAS and also aches and cramps in the calf muscles bilaterally.

The onset was described as insidious over the last year but increasing more recently ( and also his work health insurance was about to lapse as he was retiring) prompting him to seek help.

He recognises no daily pattern... it's pretty much low grade all the time

The pain in the low back was described as a dull nagging low grade ache 3 on a VAS never sharp or shooting but constant.

The pain is not better for pain relief but nothing has really been tried.

He hasn't really noticed anything that makes it worse except walking which he just doesn't do on any regular basis ( makes his calf's ache)

In his medical history he see his GP on a regular basis for cholesterol checks as he has familial hypercholesterolemia and refuses to take meds anymore as he got rhabdomyolysis and depression on lipostat.

He had Benign Prostatic Hypertrophy which he had surgery 5 years ago for but has an enlarged bladder as a result....

Also he has bilaterally dequervain's contracture in his hands (and mildly in his feet) and has had corrective surgery on both hands 3 times to correct.

Family medical history dad died in train crash.... Mum lived to 90 YOR

**Discuss!**