# ED OBSERVATION UNIT: UROLOGY PROTOCOL NYC H+H KINGS COUNTY HOSPITAL CENTER

General Observation Guidelines apply for all ED observation patients

INCLUSION CRITERIA	EXCLUSION CRITERIA
<ul> <li>Obstructing ureteral stone</li> <li>Scrotal abscess</li> <li>Priapism</li> <li>Minor Post-operative complication</li> <li>Mild to moderate hematuria</li> <li>Any other diagnosis deemed appropriate by the Urology team</li> </ul>	<ul> <li>Infectious Process, Fever, UTI</li> <li>Obstruction secondary to:         <ul> <li>a. Novel Retroperitoneal Process (Hematoma, Neoplasm)</li> <li>b. OBGYN related pathology (Pelvic Malignancy, Endometriosis)</li> <li>c. Phimosis/Paraphimosis</li> </ul> </li> </ul>

#### **INTERVENTIONS**

Standard care in line with Urology team recommendations

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#### Home:

- Stable vital signs
- Mental Status at baseline
- Ambulatory (or at baseline with ADLs)
- Adequate oral intake
- Urology follow up within 48 hrs.

#### Admission:

• Persistent/ Worsening symptoms

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### **NYC H+H KINGS COUNTY HOSPITAL CENTER**

#### Table 5

Causes of Postrenal Acute Kidney Injury

Upper tract obstruction
Nephrolithiasis
Blood clots
Papillary tissue
Pelvic neoplasms
Endometriosis
Retroperitoneal processes
Neoplasms
Adenopathy
Fibrosis
Hematoma
Gastrointestinal neoplasms
Radiation treatment
Lower tract obstruction
Urethral strictures
Nephrolithiasis
Blood clots
Phimosis/Paraphimosis
Prostatic processes
Benign hypertrophy
Carcinoma
Calculi
Bladder processes
Carcinoma
Calculi
Neurogenic bladder