

ED to Urology Referral Pathway for Ketamine Induced Interstitial Cystitis

Patient presents with Urological symptoms (urgency, dysuria, haematuria, bladder pain) **AND** confirm chronic heavy ketamine use (>3 months, using ≥ 3 times/week)

Investigations: U&E, FBC, CRP and Urinalysis + MSU and patient weight.

Treatment: Analgesia (Paracetamol, Naproxen), Commence patient on Anticholinergics (Solifenacin or Darafenacin).

≥ 18 Years old – Patients to be seen by DALT Nurses prior to discharge.

N.B. Out of Hours – confirm patient is happy to be contacted by phone and refer to DALT via Careflow for them to contact patient next working day.

<18 Years Old – Patient completes the paediatric illicit drug screening tool and is referred to community services as per current departmental process.

Admit to Urology via Gen. Surg. SHO if:

- Fever
- Pyuria
- AKI
- Uncontrollable pain

Discharge:

- No indications for admission
- Request USS KUB as outpatient (patient level order: Mr Omar - Urology).
- TTO Anticholinergic and Analgesia
- Reiterate DALT advice – cessation is most important part of treatment and promotes bladder healing.
- Refer to Ketamine Cystitis Urology clinic via intranet referral form.