

HISTORY

HPC	<ul style="list-style-type: none">• Duration symptoms• Speed of onset: Sudden / Gradual• Trauma: Post GU surgery / Catheterisation• Fevers• Abdo pain: Colicky• Dysuria• Clot risk factors: Recent GU surgery• Malignancy symptoms: Weight loss / Malaise• Vasculitic symptoms: Weight loss / Joint pain / SOB / Nose bleeds / Purpura rash/ Ulcers
PMH	<ul style="list-style-type: none">• CKD• Recurrent urinary infections• GU malignancy• Disorders of coagulation• Vasculitic disease
DH	<ul style="list-style-type: none">• Anti-platelets• Anticoagulation
SH / FH	<ul style="list-style-type: none">• Smoking status: Non / Current / Ex• LMP• STI risk

EXAMINATION

GENERAL OBSERVATIONS	<ul style="list-style-type: none">• Distressed• Patient pale• Urine colour: Clear / Visible haematuria / Frank blood / Clots
AIRWAY	<ul style="list-style-type: none">• Ensure airway patent
BREATHING	<ul style="list-style-type: none">• Physical Observation: FiO₂ / RR / SaO₂• Auscultation: Wheeze / Crackles / Air entry• Sputum: Haemoptysis
CIRCULATION	<ul style="list-style-type: none">• Physical Observation: HR / BP• Fluid input-output: Fluid output / Urinary frequency• CRT: Central / Peripheral• Mucus membranes: Moist / Dry
DISABILITY	<ul style="list-style-type: none">• Physical Observation: Temp• GCS: >8 / ≤8
EXPOSURE	<ul style="list-style-type: none">• Rash: Purpuric / Petechiae / Ulcers• Abdo: Palpable bladder / Renal angle / Suprapubic tenderness• PV examination: bleeding

INVESTIGATIONS

BLOODS	<ul style="list-style-type: none">• FBC / U&E / CRP• LFT• Clotting• Group and Save• +/- ANCA (suspecting Vasculitic disease)	
ECG	<ul style="list-style-type: none">• Rate• Rhythm: Arrhythmia• Ischaemia: ST segment / T wave inversion / New LBBB	
URINALYSIS	<ul style="list-style-type: none">• Blood: Visible / Microscopic• Leukocytes• Nitrites• Protein• Pregnancy test	
MICRO	<ul style="list-style-type: none">• Urine culture: If +ve urinalysis	<div>DO NOT TEST IF AGE > 65 AND SYMPTOMATIC. TREAT EMPERICALLY + SEND MC&S</div>
CT KUB	<ul style="list-style-type: none">• Renal calculi• Kidney / Ureter / Bladder mass	<div>DISCUSS WITH SENIOR</div>

POTENTIAL DIFFERENTIALS

SEPSIS / INFECTION UTI / PYELONEPHRITIS	COAGULATION DISORDER / ANTICOAGULATION	
GU MALIGNANCY	RENAL CALCULI	GLOMERULONEPHRITIS DISORDERS
VASCULITIS	GU TRAUMA / SURGERY	POST CATHETERISATION