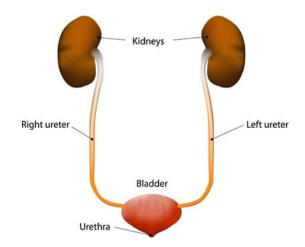
## **Advise for Patients with kidney / ureteric stones**



## The Kidneys

The kidneys are 2 bean-shaped organs that are roughly 10cm (4 inches) in length. They're located towards the back of the abdomen on either side of the spine.

Urine produced from the kidneys goes down the ureter and stored in the bladder until you pass urine.



Kidney stones can develop in 1 or both kidneys and most often affect people aged 30 to 60.

They're quite common, with more than 1 in 10 people affected.

You may have no symptoms with a kidney stone – many are picked up incidentally on scans for other conditions. However, when stones pass to the ureter this can be extremely painful, and can lead to an urgent / emergency presentation to the hospital.

## WHEN TO GET FURTHER URGENT MEDICAL HELP?

If you have been recently diagnosed with a ureteric stone, please contact SURGICAL ASSESSMENT UNIT (SAU) (Between 9am to 5pm) on 01413149589 or return to the EMERGENCY DEPARTMENT if you have the following symptoms:

- You have a high temperature and in pain
- You are in <u>severe pain not settling</u> with pain killers you could be admitted for observation / assessment / treatment if you present more than once.

If you have an obstructed kidney due to a ureteric stone and have a high temperature - this is a urological emergency and may require URGENT surgical treatment

It is not appropriate to contact the urology secretarial staff – they are not medically trained.

## **Conservative Treatment**

If you have been diagnosed with a small ureteric stone (that staff believe may pass on its own) and are clinically well with acceptable bloods, you may well be allowed home to attempt passing the stone yourself – the success of this depends on the size and position of the stone. It may take some weeks. Please remember the advice above as to when to potentially seek urgent help – and keep this leaflet.

In the meantime, your details will be passed onto a urologist with an interest in stone disease, who will review your images and tests and convey an appropriate management plan. They may request further imaging and review (either face to face or telephone) or may even write with a treatment plan.

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